Special Event Information Sheet

Licensing Office:
55 North Center Street Mailing
Address:
PO Box 1466
Mesa, Arizona 85211-1466
480-644-2316 Telephone
480-644-3999 Fax
http://mesaaz.gov/business/licensing



General Information

A Special Event is a temporary use in all zoning districts which:

- 1. Is intended for purposes of entertainment, education, commercial promotion, or cultural, religious, ethnic, or political expression.
- 2. Is conducted on public or private property on a site or in an area which may not be specifically zoned, authorized, or otherwise approved for such use on a permanent basis.
- 3. Is carried on in a temporary structure, or outside.
- 4. May occur in conjunction with an existing permitted use or as a separate activity.
- 5. Includes parades, sporting events, circuses, fairs, carnivals, festivals, religious revivals, political rallies, vehicle shows and displays, and similar recognized temporary activities
- 6. Shall not include wedding and funeral ceremonies, holiday boutiques, elections, private yard sales, Christmas tree and pumpkin sales lots, and charity car washes.

If you plan to organize a special event in the City of Mesa, please complete the application, site plan and appropriate attachments. Answer each question with as much detail as possible. Return application and related information to:

In person:

Licensing Office

55 N. Center Street

Mesa, AZ 85201

By Mail:

Licensing Office

PO Box 1466

Mesa, AZ 85211

Mesa, AZ 85211

The application process time can take from 30 to 90 days depending upon the scope of the event. Please be sure you apply early. Our recommendation is to apply prior to doing any advertising for the event.

The fees for a special event are \$100.00 per day with a maximum fee of \$300.00. **These fees are non-refundable**. If an event is going to be for more than 4 days you must obtain a Special Use Permit (see Attachment E for requirements).

Make sure:

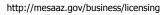
- ✓ Your application is signed and dated
- ✓ You have included the payment with the application
- ✓ You have completed all sections of the application
- ✓ You have all required County and State permits
- ✓ All of the following required documents are submitted with your application:

Yes	N/A
	☐ IRS 501(C) tax exempt letter (if applicable)
	Certificate of Insurance
	Attachment A – Fire Safety
	Attachment B – Liquor Licensing
	Attachment C – Fireworks
	City of Mesa Pyrotechnics Operators List
	Attachment D – Parade Questionnaire
	Attachment E – Special Use Permit
	Attachment F – Streets/Traffic and traffic control/barricade plan.
	Attachment G – Entertainment/Vendors
	Letter of Approval – approval by property owner for use of the property during the event.
	Site-Plan drawn to scale – must provide all required information.

Special Event License Application

Licensing Office 55 North Center Street PO Box 1466

Mesa, Arizona 85211-1466 480-644-2316 Telephone 480-644-3999 Fax





Date of Application		License Application #	
Is the proposed event spo	onsored or co-sponsored by th	ne City of Mesa? (Y/N)	
If yes, who is the City cor	itact person?		
	soring or co-sponsoring this e th the appropriate staff memb	event, it is recommended that you oper.	coordinate completion of
EVENT NAME			
EVENT ADDRESS/LOCA	ATION		
EVENT DATES			
EVENT TIMES			
EVENT DESCRIPTION_			
	Applicant/	Promoter Information	
Name of Applicant/Promo			
()	<u> </u>	(<u>)</u> Cell Phone Number	
Day Phone Number	Fax Number	Cell Phone Number	
Business Address	City	State	Zip
E-Mail Address		Web Address	
Please list any professiona	al event organizer, event serv	ice provider, or commercial fund-ra	aiser hired by you that is
authorized to work on you	ur behalf to plan, produce and	d/or manage your event.	
EVENT ORGANIZER (IF USING A <u>PROFESSIONAL E</u>	EVENT ORGANIZER, COMPLETE TH	IS SECTION)
Name		Compar	ny Name
Address	City	State	Zip
()	()	()	
Day Phone Number	Fax Number	Cell Phone Number	
E-Mail Address		Web Address	

EVENT INFORMATION

DATE/TIME		(Circle One)	(Circle One)
Setup	Day/Date	From	AM PM	To <u>AM PM</u>
First Day of Event	Day/Date	From	AM PM	To AM PM
Second Day of Eve	nt Day/Date	From	AM PM	To AM PM
Third Day of Event	Day/Date	From	AM PM	ToAM_PM
Fourth Day of Ever	nt Day/Date	From	AM PM	ToAM_PM
Dismantle	Day/Date	From	AM PM	ToAM_PM
	Note: Any more t	han 4 days may requir	e a Special Use	e Permit.
ANTICIPATED A	ITENDANCE			
Per day breakdown Total		ond Day #Thi	rd Day #	Fourth Day #
LOCATION DESC	RIPTION			
☐ Parking Lot	Residential Prop	erty Down	town Overlay I	District
☐ Commercial Pro	perty Public Thoroug	hfare (street/sidewalk/	'alley) 🗌 Parl	
School/Church	☐ Vacant Lot			
Other				
What type of area	is being used: paved, asp	ohalt, rock, etc.?		
If more than fo		en held at a site outs ear, a special use pe (See <u>Attachment</u>	rmit is requir	owntown Overlay District in a red.
EVENT HISTORY				
Yes No	s this event been held in	the past? If so, how r	nany years ha	ve you been holding this event?
	s this event ever been he ferences:	eld at another location?	If yes, pleas	se provide the appropriate
Date(s) Lo	cation(s)	Contact Name		Phone Number

EVENT FEATURES

If events inclinstructions)		ا, a detailed site plan must be sı	ibmitted (see site plan
Yes No	Right of Way Usage		
Will the event	require any closures or rest	rictions of streets, sidewalks, alleys	or parking lots?
If yes, <u>Attack</u> application. closure invol	nment F and a traffic con For information on traffi	itrol plan must be completed and control plans, call Traffic & Stop parking lot please submit a Lei	d submitted with this reets at 480-644-2160. If the
Yes No If yes, Attachr	Parade nents D and F must be com	pleted and submitted with this app	lication.
NOTE: Tents o	Tents/Canopies tachment A for detailed ver 400 sq. ft. (i.e. 20x20) a epartment. Please refer to	and canopies over 1200 sq. ft. (i.e. :	30x40) require permits from the City
Yes No If yes, see Atta	Open Flames/Cookin		
height, wher	e security will be posted	The Site Plan, indicating entry, and complete the following information and complete the followi	Phone
Yes No If yes, see Atta	Electrical Services/Goodhachment A for detailed info		
	Liquor nent B must be completed a completed.	and submitted with this application	ı.
	Fireworks nent C must be completed a conal insurance is required.	and submitted with this application	ı .
Yes No	Carnival/Rides		
Please indicate	the number of rides	 Contact	Phone
Please indicate Amusement Co	the number of rides	Contact City	Phone Zip
Please indicate Amusement Co	the number of rides	Contact City	Phone Zip
Please indicate Amusement Co	the number of rides	ContactCity	Phone Zip
Please indicate Amusement Co Street Proof of additi Yes No Entertainment	the number of ridesompanyonal insurance is required.	ContactCity	Zıp
Please indicate Amusement Co Street Proof of additi Yes No Entertainment Street	the number of ridesompanyonal insurance is required. Inflatables/Air Balloc	ContactCity	Zıp

June 19, 2013

Yes □	No	Entertainment				
		ertainment, performers o			_	
If yes,	, <u>Attachr</u>	nent G must be compl	eted and submitted	with this applica	ition.	
Yes	No	Concessionaires/Ve	ndors			
∐ Will the	∴ ere be coi	ncessionaires/vendors at	the event selling food	and/or other goods	s?	
If yes,	Attachr	nent G must be compl	eted and submitted	with this applica	ition.	
		vendor list, including rcement@mesaaz.gov				ubmitted to
<u>IICCIIS</u>	<u>Ingicino</u>	recinemesta2.gov	2 Weeks before and	diter the event.		
Yes □	No	Trash & Recycling S	ervices			
 Do you	ı have a c	company handling the tra		es for your event?		
If "Yes	", please	provide the following info	ormation:		D.	
Com	ior/Servic nanv Add	e Provider ress	Contac	: Citv	Pnone_ 7in	
If "No"	the City	of Mesa's Solid Waste Ma	inagement Departmen	t is able to provide	trash and recycling	services for
your e	vent, plea	se call 480-644-3671 for	information.			
Yes	No	Portable Restrooms	–			
		Portable Restrooms				
Per <mark>Ma</mark>	ricopa Co	ounty Health Code, Chapt	er II, Section 6, Regula	ation 6b:		
At any	public ga	thering for any commerc	ial, religious or public	event where adequ		
		the immediate premises r chemical type adequate				
		hering, with the minimum				
Total n	umber of	portable restrooms				
		accessible portable restro	ooms (10% of total #	must be ADA)		
	Compar	ny	Conta	ct	Phone	
	Street_			City		Zip
	If you a	re not providing portable	restrooms, please exp	lain why		
	•			•		

For Office Use Only:

PROMOTER STATUS/PROCEEDS/REPORTING

	Corpo	ration/Organization	Name					
State (of Inco	Drporation Is the Promoter a		Tax ID #			City	Sales Tax #
Yes	No	Is the Promoter a attach to this appropriately certifying your cu	a bona fide tax e olication a copy	exempt, nonpro of your IRS 50	1(C) tax exe			ding proof and
FEES:		cerenying your ec	arene tax exemp	or, monprone se	acasi			
Are pat	tron adı	mission fees require	ed?		Ye _ Ye] [lo Cost	
Are ver	ndor fee	es required?] [Cost	
Are pai	rticipan	t fees required?			Ye	es N	lo] Cost	
If you:	answer	ed yes to any of the	"FFFS" questio	ns a Transact	ion Privilege	Tay Lic	ense may h	ne required
ii you t	ariswer	ed yes to driy or the	z TEES questio	SECURIT'		TUX LIC	crise may b	e required:
applica	nt mus	security staff and/o t provide the follow ervice is at the exp	ing information	to include with				
		Will the event be Officers must be						ry police officers, ca
Numbe	er of pol	lice officers to be co	ontracted	Police (Contact			
Yes The Cit	No ty of Me	Will the event be esa only allows secu						Arizona.
Securit	y Comp	pany			AZ Dept. o	of Public	Safety Ide	ntification Number
Addres	S		City		State		Zip	
Securit	y Comp	pany Contact Persor	1					Phone Number
Numbe	er of pe	rsonnel contracted_						

	ecurity plan including crowd control, venue safety, overnight security, security personnel shifts, etc.
-	
-	
	CHECKLIST
	CHECKLIST
Refore submittir	ng your application, make sure you review the following checklist to ensure your application is
complete.	ig your application, make sure you review the following checklist to chaute your application is
Completed	N/A
	Attachment A – Fire Safety
	Attachment B – Liquor Licensing
	Attachment C – Fireworks
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	☐ Site-Plan drawn to scale — must provide all required information.
	☐ Certificate of Insurance.

HOLD HARMLESS AND INSURANCE

HOLD HARMLESS

I voluntarily waive, release, discharge, and hold harmless the City of Mesa, its employees, supervisors, appointed officials, agents, representatives and volunteers from all claims for all injuries to event attendee(s) no matter how severe. This waiver does not extend to any such claim or liability that is solely and exclusively by the gross negligence of the City of Mesa or its employees, supervisors, appointed officials, agents, representatives and volunteers.

INSURANCE

You will be notified within (7) seven working days from the date the city received the application if proof of insurance will be required for your Special Event. If proof of insurance is required, your event or activity will not be approved or scheduled until your Certificate(s) of Insurance has been approved by a City of Mesa designee and is on file with the City.

It is suggested that you make the insurance requirement your first priority. You are encouraged to have your Certificate(s) prior to any event promotions.

Certificates of Insurance are required prior to the issuance of the Special Event License. NO EXCEPTIONS.

AFFIDAVIT OF APPLICANT

I certify that the information contained in this application is true and correct to the best of my knowledge and belief and that I have read, understand and agree to abide by the rules and regulations governing the proposed Special Event under the City of Mesa Municipal Code and I understand that this application is made subject to the rules and regulations established by the City Council and/or the City Manager or the City Manager's designee. Applicant agrees to comply with all other requirements of the City, County, State, Federal Government and any other applicable entity, which may pertain to the use of the Event venue and the conduct of the Event. In the event that a possessory interest subject to property taxation is created by virtue of this use permit, I agree to pay all possessory interest taxes and the City shall not be liable for the payment of such taxes. I further agree that the payment of any such taxes shall not reduce any consideration paid to the City pursuant to this use permit. I agree to abide by these rules, and further certify that I, on behalf of the Promoter, am also authorized to commit that organization, and therefore agree to be financially responsible for any costs and fees that may be incurred by or on behalf of the Event to the City of Mesa.

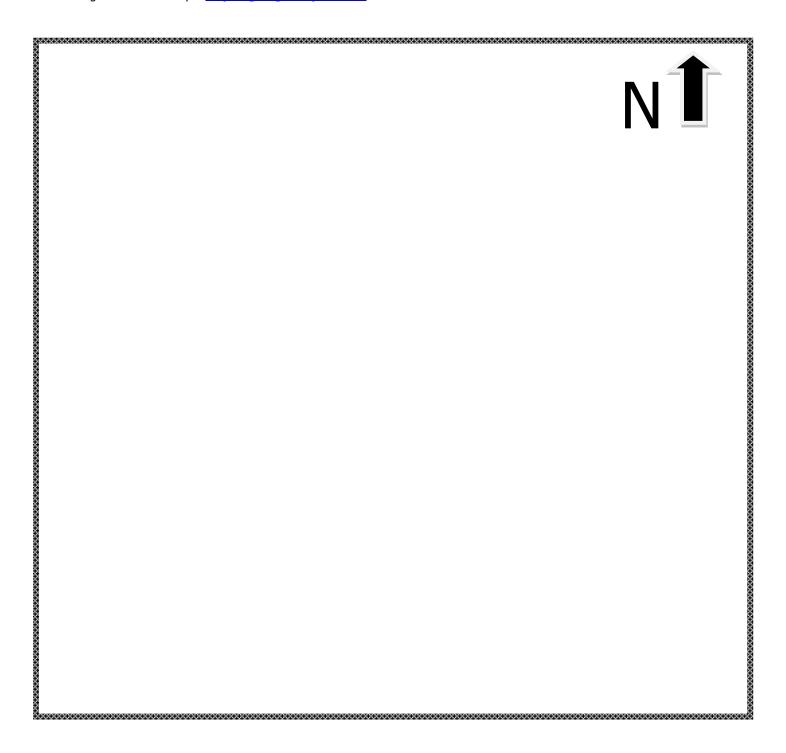
Print Name of Applicant/Promoter (if applicable)		
Title		
Signature	Date	
Print Name of Professional Event Organizer (if applicable)		
Title		
Signature	Date	

SPECIAL EVENT SITE-PLAN (Site-Plan must be submitted with this application.)

Required information (all that apply to this event): Show proximity to buildings/structures, streets, dimensions, tents/canopies, security stations, fencing including height and type, fire features, inflatables, stage location, and any obstacle course.

Providing all the required information will ensure prompt application processing. The same diagram can be submitted with both the City and State application.

A "bird's eye view" may replace the Special Event Site-Plan. Please include all the above required information. Visit the following link for an example http://goo.gl/maps/J78rb



Special Event Letter of Approval

Licensing Office: 55 North Center Street Mailing Address:

PO Box 1466 Mesa, Arizona 85211-1466 480-644-2316 Telephone 480-644-3999 Fax

http://mesaaz.gov/business/licensing

Date:	
Property Manager or Owner Name:	
Contact Phone Number:	
Special Event Name and Location:	
Requested Closure Date(s) and Time:	
As property manager/owner for the commercial property address listed above, I acknowled have been informed by the promoter of the Special Event that a request to close off the a	_
during the special event has been submitted to the City of Mesa. Possible conflicts or impacts	
the surrounding businesses have been addressed.	
Signature of Property Manager/Owner	